LIMITED PARTNERSHIP	FLORIDA DEPARTA	MENT OF STATE		
ANNUAL REPORT	Sandra B. N		-	
1999	Secretary o		1	ILED
	DIVISION OF COM	RPORATIONS	IAI. PO	N-5 PM 1:28
1. Name of Limited Partnership	^{1a.} DOCUME A29611	ENT #	SECRET	TARY OF STATE ASSEE, FLORIDA
CSF-CHRISTINE LIMITED PA	RTNERSHIP			
Mailing Address 20.0	Principal Office Address			5a. Capital Contributions as Shown on record.
2001 ROSS AVENUE, SUITE 3500-	3200 3200 NUE, SUITE 3509- 2001 ROSS AVENUE, SUITE 3500-		02/02/1990	1
DALLAS TX 75201	DALLAS TX 75201			\$100.00
				5b. Amount of Capital Contributions in FLORIDA
2. Mailing Address	22 Principal Office Address	2a. Principal Office Address		to date:
			TX	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. FEI Number	Applied For
City & State	City & State		75-2319259	Not Applicable
Zip Country	Zip	Country	7. Certificate of Status Desired	S8.75 Additional Fee Required
			8. Make check payable to: Dept. of S	State (See reverse side for fee information)
9 Name and Address of Cun	rent Registered Agent		10. If changed, new Registered	Agent/Office
		Name		
PRENTICE HALL LEGAL & FINANCIAL SERVICES 1201 HAYS ST.		Street Address (P.O. Box Number Is Not Acceptable)		
SUITE 105		Sulle, Apt. #, etc.		
TALLAHASSEE FL 32301		City Zip Code		
		City	. ,	
for the purpose of changing its registered office agent. I am familiar with, and accept the obligat	and 520.192, Florida Statutes, the above-named or registered agent, or both, in the State of Florida ions of section 620.192, Florida Statutes.	limited partnership orga		State of Florida, submits this statement
for the purpose of changing its registered office agent. I am familiar with, and accept the obligat SIGNATURE (Registered Agent Accepting Appointment), A GENERAL PARTNER THA	or registered agent, or both, in the State of Florida ions of section 620.192, Florida Statutes.	limited partnersitip orga b. Such change was aut	horized by its general partner(s). I hereby DATE.	FL State of Florida, submits this statement accept the appointment of registered
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